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APPLICANTS

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** CONTINUING DATA ***** NONE
CME

** FOREIGN APPLICATIONS ***** NONE
CME

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 01/13/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance	STATE OR COUNTRY NY	SHEETS DRAWING 18	TOTAL CLAIMS 36	INDEPENDENT CLAIMS 6
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Verified and Acknowledged
 Examiner's Signature *C. Kuehnert* Initials *CME*

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TITLE
 Trench isolation employing a high aspect ratio trench

FILING FEE RECEIVED 1316	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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